

POOR LEGIBILITY

ONE OR MORE PAGES IN THIS DOCUMENT ARE DIFFICULT TO READ
DUE TO THE QUALITY OF THE ORIGINAL

PRELIMINARY ASSESSMENT

DATE: April 21, 1989

PREPARED BY: Sandra R. Beecher
California State Department of Health Services
Toxic Substances Control Division
Region 2

SITE: Steelweld Company AKA CLNCO Flange
504 Emory Street
San Jose, CA 95110

ASPIS: 43-35-0010

EPA ID NO.: CAD 982358988

1. Site Description:

Steelweld site (aka CLNCO Flange) is presently an inactive site. CLNCO Flange moved approximately six months ago, according to Mr. Gersham, owner of the property at 504 Emory Street, San Jose, CA. Mr. Gersham, stated that CLNCO Flange was a small company that cut and welded piping to form flanges. CLNCO Flange resided at 504 Emory Street for approximately forty years. No toxic waste or materials were stored at this site (1).

According to San Jose Fire Inspection Reports from 1985-1988, no hazardous materials were present. CLNCO Flange was Hazmat exempt (2).

2. Apparent Problem:

This site was identified during a drive-by in 1981 by the Department of Health Services Abandoned Site Program (3). Discolored soil were observed during this drive-by (3). Another drive-by was conducted in 1988 (4). This drive-by did not reveal any discolored soil (4). There was about five empty drums along side the fence (4).

No files were found at the Santa Clara County agencies or the State of California agencies. (5)

3. HRS Factors:

Based on the record search conducted, there is no evidence to indicate that hazardous waste or materials were ever

generated, manufactured or disposed on this site. Therefore, hazard ranking factors were not addressed.

4. Conclusions and Recommendations:

There is no information that can document that this site generated or disposed of hazardous wastes. There are no complaints or files at the county or state agencies. The San Jose Fire Department had inspection reports stating that this site was HAZMAT exempt.

4.1 EPA Recommendations:

The current available information does not support a recommendation for further action under CERCLA.

4.2 DHS Recommendation:

No further action, there is no evidence of hazardous materials or waste at this site.

References

1. Contact Report Between Mr. Gersham and Sandra Beecher, Department of Health Services, April 14, 1989.
2. San Jose Fire Prevention Inspection Reports, 1985 - 1988.
3. Site Screening, Site Tracking Sheet, May 29, 1987.
4. Abandoned Site Program Drive-By Record, August 1988.
5. Preliminary Assessment contact log.

CONTACT LOG

California Department
of Health Services

Sandra Beecher

(415) 540-2550
Drive-By

Santa Clara County
Health Hazardous
Materials Program

Tony Pacheco
April 13, 1989

(408) 299-6930

Department of Health
Services

Doris Cruz
April 13, 1989

(415) 540-2998
No File

San Francisco Regional
Water Quality Control
Board

File Room
March 22, 1989

(415) 464-1255
No File

Date: 4/14/89
Time: 10 AM
To: FILE
From: SANDRA BEECHER

**RECORD OF
COMMUNICATION**

☐ Discussion
☐ Meeting
☐ Other

☐ Field Trip
☒ Phone Call

Subject:

504 EMORY

SUMMARY:

MR. GREHAM OWNER OF THE PROPERTY AT 504 EMORY ST.,
SAN JOSE, STATED THAT CUNCO FLANGE MOVED ABOUT 6 MONTHS
AGO. THEY WELDED AND CUT PIPING TO MAKE FLANGES. NO
HAZARDOUS WASTE WAS STORED ON-SITE.

FROM COLMAN ST. TO RAILROAD TRACKS IS ALL
M-1 PROPERTY.

Beecher

Firm: _____

Address: _____

Tel. No. _____

☐ Conclusions☐ Actions taken☐ Actions to be takenInformational copies: _____

240 ' 1A
Pfy r 09.



SAN JOSE FIRE DEPARTMENT
Four North Second Street
Suite 1100
San Jose, CA 95113-1305

(408) 277-

401438
ESS ACCT NO
039025

FPB

TOTAL DUES

10.00

BUSINESS
INFORMATION
(PRINT)

STREET NUMBER DIR STREET NAME TYPE BUILDING UNIT PAGE # X Y
504 EMORY ST

BUSINESS NAME BUSINESS PHONE NUMBER
GLUCO FLANGE INC 294-3907

BUSINESS OWNER'S NAME (LAST FIRST) LAST INSP DATE
LAZOR / NEWLAND / GILMORE

OWNER
RESIDENCE
INFORMATION
(PRINT)

STREET NUMBER DIR STREET NAME TYPE LAST INSP BY

CITY STATE ZIP CODE AREA CODE EMERGENCY PHONE NUMBER

BUILDING
INFORMATION

UBC OCC NFPA OCC COMPLEX MGT YR CONST STORIES SQ FT GROUND FLOOR ZBB NUMBER INSP AREA
SPRIN KLERS STAND PIPES 5 YR TEST DATE ALARM SYS SPEC SYS 5 YR TEST DATE ASSEMBLY OCC LOAD DINING OCC LOAD DUE DATE

INSPECTION
INFORMATION

INSPECTION DATE ACTY DIST INSPECTOR NO COMPLETION DATE TOTAL INSP TIME HM HM CLASS
8-18-88

NOTICE OF FIRE AND SAFETY HAZARDS AND/OR FIRE PERMITS REQUIRED

You are hereby notified that an inspection of your premises has disclosed that the following permits are required and/or that corrections are required for the following violations of the following provisions of Title 19 Title 24 or Title 25 of the California Administrative Code the California Health and Safety Code or the San Jose Municipal Code

CTGY CODE	CODE SECTION	DESCRIPTION	APPR
		8-18-88 1:30pm Spoke to Larry regarding late fees delinquent fees which total \$110.00. He told Larry fees are due seven days from today (in our office). If not paid within seven days he will be issued a citation. Mr. Karen Cae 8-19-88 Larry said he will bring check in on 8-30-88 in a.m. Spoke with Larry at 1:30pm advised him to bring check in today 9-1-88 in citation would be issued exclusive of collection. Capt Evans	
NOTE FOR REPRINT NEXT YEAR.		YES <input type="checkbox"/>	

ORDER TO COMPLY:

As such conditions are contrary to law, you are hereby required to correct said conditions immediately upon receipt of this notice

An inspection to determine whether or not you have complied with this notice will be conducted within _____ days

Failure to comply with the foregoing order before the date of such reinspection may render you liable to the penalties provided by law for such violations.

SUP APPR.

FILE COPY

X

Occupant

X

Inspecting Officer (Print Name, Assignment)

X

Inspecting Officer (Signature)

240-14A



Four North Second Street
Suite 1100
San Jose CA 95113-1305

(408) 277-4656

401928

N

ESS ACCT NO

839025

OK

FPB

Y

BUSINESS
INFORMATION
(PRINT)

STREET NUMBER DIR STREET NAME TYPE BUILDING UNIT PAGE # X Y

00504 EMORY ST

BUSINESS NAME

GLNCO FLANGE INC

BUSINESS PHONE NUMBER

294-3907

BUSINESS OWNER'S NAME (LAST FIRST)

LATOR/NEWLAND/GILMORE, LARRY

LAST INSP DATE

041487

OWNER
RESIDENCE
INFORMATION
(PRINT)

STREET NUMBER DIR STREET NAME TYPE

1100 1100 1100

LAST INSP BY

00033

CITY STATE ZIP CODE

1100 1100 1100

AREA CODE EMERGENCY PHONE NUMBER

408 377-1048

BUILDING
INFORMATION

UBC OCC NFPA OCC COMPLEX MGT YR CONST STORIES SQ FT GROUND FLOOR ZBB NUMBER INSP AREA

21 B2 OK

SPRIN KLERS STAND PIPES

0 0

5 YR TEST DATE

0 0

ALARM SYS

0 0

SPEC SYS

0 0

5 YR TEST DATE

0 0

ASSEMBLY OCC LOAD

0 0

DINING OCC LOAD

0 0

DUE DATE

123087

INSPECTION
INFORMATION

INSPECTION DATE

0630-88

ACTY

9 FEB

DIST

0 0

INSPECTOR NO

04607

COMPLETION DATE

8-16-88

TOTAL INSP TIME

0 0

HM

0 0

HM CLASS

0 0

NOTICE OF FIRE AND SAFETY HAZARDS AND/OR FIRE PERMITS REQUIRED

You are hereby notified that an inspection of your premises has disclosed that the following permits are required and/or that corrections are required for the following violations of the following provisions of Title 19, Title 24 or Title 25 of the California Administrative Code, the California Health and Safety Code or the San Jose Municipal Code.

CTGY CODE	CODE SECTION	DESCRIPTION	APPR
A40	FC4101A40	WELDING/CUTTING	
		Property wire area above work shop. wire to be installed by Lic. electrician in conduit. 8-16-88 removed	JL
		Scrap metal and paper debris to be removed from work shop. 8-16-88	JL
		1st Re-inspection 7-25-88 2nd inspection on 7-25-88 No Compliance will Re-inspect on 8-3-88 J. Newland	
		Final 8-16-88 J.	
		NOTE FOR REPRINT NEXT YEAR	
		HAZMAT EXEMPT	

ORDER TO COMPLY.

As such conditions are contrary to law, you are hereby required to correct said conditions immediately upon receipt of this notice.

An inspection to determine whether or not you have complied with this notice will be conducted within 30 days.

Failure to comply with the foregoing order before the date of such reinspection may render you liable to the penalties provided by law for such violations.

X J. Newland
Occupant

X C. R. Piper
Inspecting Officer (Print Name, Assignment)

X C. R. Piper
Inspecting Officer (Signature)

SUP APPR.

FILE COPY

240 14A
REV 7 87

San Jose Fire Department
801 North First Street
San Jose, California 95110

TELEPHONE —
(408) 277- 4656

BU IS ACCT. NO. 039025 04
 FPE Y

STREET NUMBER		DIR. STREET NAME		TYPE		MAP REFERENCE			
						BUILDING UNIT	PAGE #	X	Y
1000		HENRY		ST					

**BUSINESS
INFORMATION
PRINT)**

BUSINESS NAME		BUSINESS PHONE NUMBER	
GLYNCO FLANGE INC		214-350-7	

BUSINESS OWNER'S NAME (LAST, FIRST)

GILMORE/LAZER/NEWLAND 103185

OWNER
RESIDENCE
INFORMATION
PRINT]

STREET NUMBER	DIR. STREET NAME	TYPE	LAST INSP. BY
<div style="border: 1px solid black; padding: 2px;"> <div style="border: 1px solid black; display: inline-block; width: 100%; height: 1.2em; margin-bottom: 2px;"></div> <div style="border: 1px solid black; display: inline-block; width: 100%; height: 1.2em;"></div> </div>			<div style="border: 1px solid black; padding: 2px; text-align: center;"> <div style="border: 1px solid black; display: inline-block; width: 100%; height: 1.2em; margin-bottom: 2px;"></div> <div style="border: 1px solid black; display: inline-block; width: 100%; height: 1.2em;"></div> </div>
CITY, STATE, ZIP CODE	AREA CODE EMERGENCY PHONE NUMBER		

CITY, STATE, ZIP CODE			AREA CODE			EMERGENCY PHONE NUMBER		

UBC OCC.	NFPA OCC. COMPLEX	MGT	YR CONST.	STORIES	SQ. FT. GROUND FLOOR	ZBB NUMBER	INSP. AREA
82	774		00	01	6000	258	00033

BUILDING INFORMATION

[illegible]INSPECTION
INFORMATION

INSPECTION DATE	ACT'Y	INSPECTOR NO.	COMPLETION DATE	TOTAL INSP TIME	HM	HM CLASS
4/17/87	0103	53	4/14/87	3		11

NOTICE OF FIRE AND SAFETY HAZARDS AND/OR FIRE PERMITS REQUIRED:

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[illegible]

ORDER TO COMPLY:

if such conditions are contrary to law, you are hereby required to correct said conditions immediately upon receipt of this notice. An inspection to determine whether or not you have complied with this notice will be conducted within _____ days. Failure to comply with the foregoing order before the date of such reinspection may render you liable to the penalties provided by law for such violations.

X 2 Number of
Occupant

x IN CRUELLS
Inspecting Officer (Print Name Assignment)

FILE COPY
X *[Signature]*
Inspecting Officer (Signature) 240-14



San Jose Fire Department
801 North First Street
San Jose, California 95110

TELEPHONE
(408) 277- 4656

ESS ACCT. NO. 039025
FPPB

BUSINESS
INFORMATION
(PRINT)

STREET NUMBER DIR. STREET NAME TYPE BUILDING UNIT MAP REFERENCE
PAGE # X Y

BUSINESS NAME

BUSINESS PHONE NUMBER

BUSINESS OWNER'S NAME (LAST, FIRST)

LAST INSP. DATE

060184

OWNER
RESIDENCE
INFORMATION
(PRINT)

STREET NUMBER DIR. STREET NAME TYPE

LAST INSP. BY

00034

CITY, STATE, ZIP CODE

AREA CODE EMERGENCY PHONE NUMBER

BUILDING
INFORMATION

UBC OCC. NFPA OCC. COMPLEX MGT YR CONST. STORIES SQ. FT. GROUND FLOOR ZBB NUMBER INSP. AREA
SPRINK. STAND 5 YR TEST DATE ALARM SYS SPEC SYS 5 YR TEST DATE ASSEMBLY DINING
KLERS PIPES OCC. LOAD OCC. LOAD DUE DATE
050485

INSPECTION
INFORMATION

INSPECTION DATE ACT'Y 06 03 INSPECTOR NO. 010033 COMPLETION DATE 10/31/88 TOTAL INSP TIME 715 HM CLASS 3

NOTICE OF FIRE AND SAFETY HAZARDS AND/OR FIRE PERMITS REQUIRED:

You are hereby notified that an inspection of your premises has disclosed that the following permits are required and/or that corrections are required for the following violations of the following provisions of Title 19, Title 24 or Title 25 of the California Administrative Code, the California Health and Safety Code, or the San Jose Municipal Code.

CTGY CODE	CODE SECTION	DESCRIPTION	APPR
69	FPC30.3	WELDING & CUTTING	JAL
		1 OCT TANK 305 CUBIC FT	
		1 OX TANK 281 CUBIC FT	
34	T24 E400-24	REPAIR ALL OPEN WIRING IN STORAGE SHED ALL WORK TO BE DONE BY LICENSED CONTRACTOR WITH PERMITS Refer to Hazmat	BK
		HAZMAT EXEMPT Work Station	JA
NOTE FOR REPRINT NEXT YEAR: YES <input checked="" type="checkbox"/> Hazmat Exempt			

ORDER TO COMPLY:

As such conditions are contrary to law, you are hereby required to correct said conditions immediately upon receipt of this notice.
An inspection to determine whether or not you have complied with this notice will be conducted within 30 days.
Failure to comply with the foregoing order before the date of such reinspection may render you liable to the penalties provided by law for such violations.

x J Newland
Occupant

x INSPECTED LO PER
Inspecting Officer (Print Name Assignment)

x [Signature]
Inspecting Officer (Signature)

SUP. APPR.

FILE COPY

GLNCO FLANGE, INC.

PHONE (408) 294-3907

504 EMORY STREET

SAN JOSE, CALIF. 95110


FEBRUARY 3, 1984

BUREAU OF FIRE PREVENTION
HAZARDOUS MATERIALS PROGRAM
CITY HALL, RM 100
801 N. FIRST ST.
SAN JOSE, CA 95110

GENTLEMEN:

TO OUR KNOWLEDGE, WE HAVE NO HAZARDOUS MATERIALS STORED ON THESE
PREMISES.

THANK YOU,


LARRY NEWLAND SEC/TREAS
408/294-3907

RECEIVED
SAN JOSE FIRE DEPT.

FEB 7 9 39 AM '83

Reference 3
ATTACHMENT 1
SITE TRACKING SHEET

Site Name: Steel-Weld Co.

Site Location: 508 Emory, San Jose, Ca., 95110

ASPIS Facility File Number: 43-35-0010

Site Screening ✓ PA SI

Site Summary:

An inactive site now occupied by CLNCO FLANGE
INC. and 504 EMORY. A site drive-by inspection
revealed discolored soil on the site. No other information
was found on this site; no file exists for Steel-Weld
CLNCO Flange or 504 Emory. Only source of information
available is from DHS abandoned site project info system.

Recommendation: PA required - M

Rationale/Supporting Documentation:

This site has virtually no data associated with it,
so a PA should be done to gather more info and recom-
mend any further action.

Supervisor: SS Preparer: William Owen

Hours Spent: 1 Date: 5-29-87

ASP 001

I-7

11/86

TOXIC SUBSTANCES CONTROL DIVISION
FACILITY INVENTORY INFORMATION

Form Usage:

- ☐ Add New Facility
☐ Delete Facility
☒ Change Facility Data

1. FILE NO. 103510,011,0
2. REGION 0 NC 0 SC 0 NCC
3. DATE PREPARED 15, 12, 91 8, 71
ED CY WF

FACILITY NAME
STEEL-WELD, CO.FACILITY LOCATION (STREET, ROAD, OR LOCATION DESCRIPTION)
508 EMORYCITY
SAN JOSE

7. STATE

CIA

8. ZIP

95110-

OPERATOR/CONTACT NAME

UNKNOWN

10. TELEPHONE NUMBER

UNK

NUMBER

OPERATOR/CONTACT ADDRESS

UNK

13. STATE

14. ZIP

PRESENT LAND OWNER NAME

UNK

16. TELEPHONE NUMBER

AREA NO.

NUMBER

PRESENT LAND OWNER ADDRESS

19. STATE

20. ZIP

21. FUND SOURCE: 0(RCRA) 2012 RCRA
0(SEP) SEP(SITE EVALUATION Program)
0(CERCLA2) CERCLA (II)

0(CERCLA) 104 CERCLA
0(SSP) SSP(SITE SURVEY PROGRAM)
0(NONE) NO FUND SOURCE

22. ACTION STATUS: DATE 10, 12, 91 8, 71

0(SUFF) SUPERFUND SITES
0(REF) SITES REFERRED
0(UNR) UNRESOLVED SITES
0(SSPH) SITE SCREENING REQUIRED (high)
0(SSPM) SITE SCREENING REQUIRED (med)
0(SSPL) SITE SCREENING REQUIRED (low)
0(PAH) PA REQUIRED (high)
0(PAM) PA REQUIRED (med)
0(PAL) PA REQUIRED (low)

0(SIRH) INSPECTION REQUIRED (high)
0(SIRM) INSPECTION REQUIRED (med)
0(SIRL) INSPECTION REQUIRED (low)
0(RSM) REFERRED TO SITE MITIGATION
0(RSF) REFERRED TO EAF
0(PDS) PENDING STATUS
0(NFA) NO FURTHER ACTION

2. COUNTRY :
SANTA CLARA

2 of 2 pages

TY FILE NAME:

STEEL-WELD CO.

5. DATE PREPARED

0.5 2.9 8.7

mo dy y

19 154078

Reference 4

ABANDONED SITE PROGRAM DRIVE-BY RECORD

Site Name: STEEL WELDSite Location: 504 EMORY ST
SAN JOSE, CAFacility File Number: 43-35-00101. Status: a. Active ☒ b. Different company _____Inactive ☐ _____2. Setting: a. Urban ☐ b. Residential ☐ c. Near:
Suburban ☐ Commercial ☐ RR tracks ☒
Rural ☐ Industrial ☒ Drainage ☐
Agricultural ☐ Freeway ☐d. Paved ☐ e. Unrestricted access ☐
Partial pave ☒ Restricted access _____
Unpaved ☐3. Waste a. Pond ☐ Trash can ☐ b. Stored Ground ☐
Contain- Pit ☐ Dumpster ☐ on: Paving ☐
ment Ditch ☐ Bag/Sack ☐ Pallet ☐
Pail/Can ☐ Piled ☐ 2ndary
Drum/Bbl ☐ Scattered ☐ contain. ☐
Tanks ☐4. Waste a. Inert ☐ Solid ☐ b. Color _____
Description Garbage ☐ Sludge ☐
(Quantities, Indstrl ☐ Liquid ☐
labeling)5. Misc. a. Site observability good b. Odors 0c. Vegetation 0 d. Topography FLAT6. Land Use (Surrounding area): M1

7. Distance to surface water (including intermittent streams): 0

8. Distance to food processing/packaging or agricultural production: 0

9. Proximity of day care centers, hospitals, nursing homes, schools or other "sensitive" populations: 0

10. Estimate the number of people living and/or working in the immediate vicinity of the site. 0

11. Proximity to sensitive environment/ecosystem? (list) 0

12. Map & Comments Present a graphic site description. Draw, describe, and comment on the following: buildings, paving, storage (raw materials, products, and/or wastes), security, vacant areas, and housekeeping practices. Identify streets, landmarks, and directions. Label other pertinent data.

THIS SITE IS ALSO KNOWN AS CINCO FLANGE.
THERE WAS NO DISCLOSED SOIL OBSERVED AT
THIS SITE AT THE TIME OF THE DRIVE-BY. FIVE
DRUMS WERE STACKED AT THE EDGE OF THE
PROPERTY BUT WERE EMPTY.

Name: Specer

Date: 8/20/88

FIELD PHOTOGRAPH LOG SHEET

TIME: 1² AM (PM)

DIRECTION: N E S W

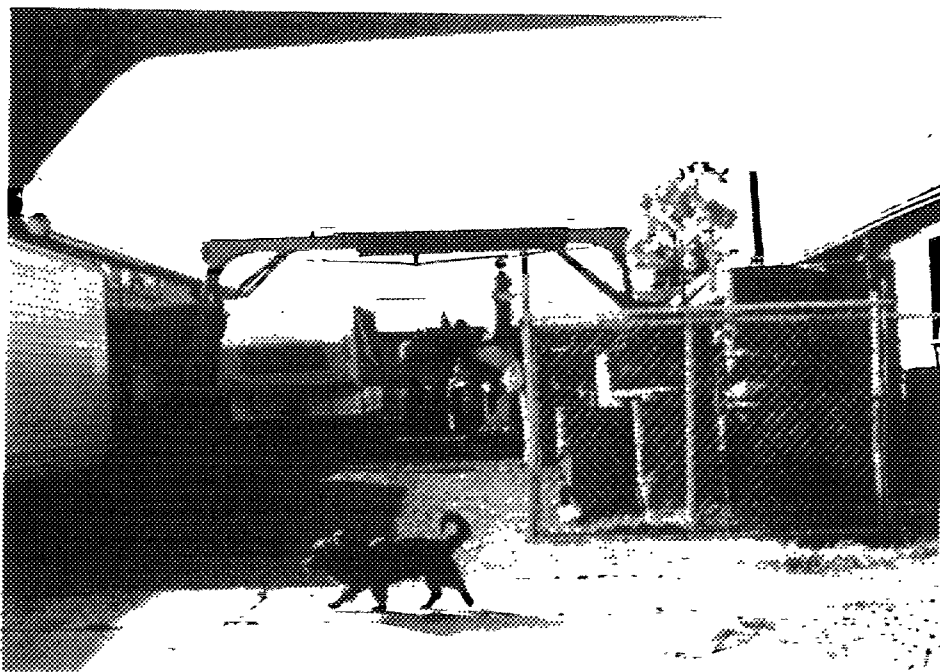
SAMPLE ID #
_____

DESCRIPTION: _____

looking at CLINCO From Coleman

TIME: 1⁰⁰ AM (PM)

DIRECTION: N E S W

SAMPLE ID #
_____

DESCRIPTION: _____

Back lot of CLINCO on Emory St.

Site Name: STEWART / CLINCO FLARE
Address: _____ASPIS # 13-35-0010EPA # CAD 982358986Photographed By: Stewart
Weather Conditions: clearDate: 8/88
Camera: 35mm

Reference 5

CONTACT LOG

California Department
of Health Services

Sandra Beecher

(415) 540-2550
Drive-By

Santa Clara County
Health Hazardous
Materials Program

Tony Pacheco
April 13, 1989

(408) 299-6930

Department of Health
Services

Doris Cruz
April 13, 1989

(415) 540-2998
No File

San Francisco Regional
Water Quality Control
Board

File Room
March 22, 1989

(415) 464-1255
No File